Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Case number (# known):	Chapter yet are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13



2816 OCT 13 AM 10: 09

U.S. BANKRUPTCY COURT
RICHMOND DIVISION
Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Identify Yourself		
Write gove iden your pass Bring	er full name e the name that is on your emment-issued picture tification (for example, driver's license or sport). g your picture	About Debtor 1: Seorge First name A ON OR Middle Rane JARDO	About Debtor 2 (Spouse Only in a Joint Case): First name Middle name
	tification to your meeting the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
have year	other names you e used in the last 8 rs ide your married or len names.	First name Middle name Last name Middle name Last name	First name Middle name Last name Middle name Last name
you nun indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx - xx - 23G7 OR 9 xx - xx	xxx - xx

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Debtor 1 Scarge Ap	example ANTO Ca	ise number (# known)
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in	PIDEM CONDOY TAX	☐ I have not used any business names or EINs.
the last 8 years Include trade names and	Business name	Business name
doing business as names	Business name	Business name
	EIN	EIN
	EIN	EIN
5. Where you live	10.07 (1 10	If Debtor 2 lives at a different address:
	Number Street Street	Number Street
	HENRICO MAGINIA	<u> </u>
	City Herrico State ZIP Code	City State ZIP Code
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Code
	City State ZIP Code	Oily City
6. Why you are choosing this district to file for	Check one:	Check one:
bankruptcy	Power the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	l have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Sease Historia Harry
First Name Middle Name Last Name

Pa	rt 2: Tell the Court Abou	ut Your B	ankruptc	cy Case		
7.	The chapter of the Bankruptcy Code you	Check or for Bank	ne. (For a b	brief description of each, see <i>Notic</i> rm 2010)). Also, go to the top of pa	ce Required by 11 age 1 and check th	U.S.C. § 342(b) for Individuals Filing appropriate box.
are choosing	are choosing to file	Chap				
	under	☐ Cha	oter 11			
		☐ Chap	oter 12			
		☐ Chap		-		
8.	How you will pay the fee	local your subr with I nee Appl I req By la less pay	i court for self, you in nitting you a pre-prin ed to pay ication for uest that iw, a judge than 150%	more details about how you n may pay with cash, cashier's our payment on your behalf, you nted address. the fee in installments. If your relatividuals to Pay The Filing temy fee be waived (You may ge may, but is not required to, we'll the official poverty line the	nay pay. Typicall theck, or money ur attorney may a u choose this op Fee in Installme request this opt waive your fee, a at applies to you his option, you m	order. If your attorney is pay with a credit card or check oftion, sign and attach the ints (Official Form 103A). Identify the control of th
9.	Have you filed for bankruptcy within the last 8 years?	□ Yes.	District	When	MM / DD / YYYY	Case number
			District	When	MM / DD / YYYY	Case number
			District	When	MM / DD / YYYY	Case number
			,/_			
10.	Are any bankruptcy cases pending or being	∆ 1√0 □ Yes.	Debtor			Relationship to you
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	_ , , , ,		When	MM/DD/YYYY	Case number, if known
	William C.		Debtor			Relationship to you
			District	When	MM / DD / YYYY	Case number, if known
11.	Do you rent your residence?	Ø Yes.	No. G	landlord obtained an eviction judged an eviction judged and some state of the second second and second seco	ment against you	

Document Page 4 of 75 Debtor 1 Case number (# km Report About Any Businesses You Own as a Sole Proprietor Part 3: 12. Are you a sole proprietor No. Go to Part 4. of any full- or part-time ×1 BUSINESP Yes. Name and location of business business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. ZIP Code Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your Chapter 11 of the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if **Bankruptcy Code and** any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. For a definition of small business debtor, see ☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in 11 U.S.C. § 101(51D). the Bankruptcy Code. Tyes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any III No property that poses or is ☐ Yes. What is the hazard? alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs If immediate attention is needed, why is it needed? _ immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? Where is the property? Street Number ZIP Code

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Doc 1

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Debtor 1

George Alexandon Aprillo
First Name Middle Name Last Name

Case number	(if known)		

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About	: De	btor	1:
-------	------	------	----

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before the filed this bankruptcy petition, and the received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before i filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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CANTEL MRIE	Case number (#	lmown)
tions for Reporting Purposes		
as "incurred by an individual property of the second secon	rimarily for a personal, family, or ho business debts? Business debt ment or through the operation of th	rusehold purpose." 's are debts that you incurred to obtain the business or investment.
Yes. I am filing under Chapter 7 administrative expenses ar	. Do you estimate that after any exc e paid that funds will be available t	o distribute to unsecured creditors? Y Two Vehicles ption poon de bton
☐ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000
□ \$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
□ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	□ \$1,000,001-\$10 million □ \$10,000,001-\$50 million □ \$50,000,001-\$100 million □ \$100,000,001-\$500 million	☐ \$500,000,001-\$1 billion ☐ \$1,000,000,001-\$10 billion ☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion
correct. If I have chosen to file under Chapte of title 11, United States Code. I under Chapter 7. If no attorney represents me and I dithis document, I have obtained and I request relief in accordance with the I understand linking a false statem with a bankryptor case can result in	er 7, I am aware that I may proceed derstand the relief available under a lid not pay or agree to pay someon read the notice required by 11 U.S he chapter of title 11, United States ent, concealing property, or obtaining fines up to \$250,000, or imprisonm 3571.	d, if eligible, under Chapter 7, 11,12, or 13 each chapter, and I choose to proceed e who is not an attorney to help me fill out .C. § 342(b). Code, specified in this petition. Ing money or property by fraud in connection nent for up to 20 years, or both.
	16a. Are your debts primarily as "incurred by an individual primarily as "incurred by an individual primarily yes. Go to line 16b. 17es. Go to line 17. 16b. Are your debts primarily money for a business or invest No. Go to line 16c. 17es. Go to line 16c. 17es. Go to line 17. 16c. State the type of debts you ow was a man to the type of debts you ow was a man to the type of debts you ow was a man to the type of debts you ow was a man to the type of debts you ow was a man to the type of debts you ow was a man to the type of debts you ow was a man to the type of debts you ow was a man to the type of debts you ow was a man to the type of debts you ow was a man to the type of debts you ow was a man to the type of debts you ow was a man to the type of type of type of the type of the type of the type of the type of ty	tions for Reporting Purposes 16a. Are your debts primarily consumer debts? Consumer das 'incurred by an individual primarily for a personal, family, or he as 'incurred by an individual primarily for a personal, family, or he as 'incurred by an individual primarily for a personal, family, or he as 'incurred by an individual primarily business debts? Business debts money for a business or investment or through the operation of the No. Go to line 16c. 18b. Are your debts primarily business debts? Business debts money for a business or investment or through the operation of the No. Go to line 16c. 18c. State the type of debts you owe that are not consumer debts or be administrative expenses are paid that funds will be available to the No. I am filing under Chapter 7. Do you estimate that after any expenses are paid that funds will be available to the No. I am filing under Chapter 7. Do you estimate that after any expenses are paid that funds will be available to the No. I am filing under Chapter 7. Do you estimate that after any expenses are paid that funds will be available to the No. I am filing under Chapter 7. I am judged that funds will be available to the No. I am filing under Chapter 7. I am aware that I million \$100,001-\$500,000 \$50,000.001-\$100 million \$100,000,001-\$500 million \$100,000,001-\$500 million \$100,000,001-\$500 million \$100,000,001-\$500 million \$100,000,001-\$500 million \$100,000,001-\$500 million \$100,000,001-\$100 million \$100,000,00

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Debtor 1 Seeinge Alexanden Antzilo
First Name Middle Name Last Name

Case number (if known)_____

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

	Date				
Signature of Attorney for Debtor		мм	1	DD	/YYYY
Printed name	·				
Firm name					
Number Street			_		
City	State	ZIP C	Code		
Contact phone	Email address				

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otor 1 George Alesanden House

Case number (# known)____

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

be ramiliar with any state exemption laws that apply.	
Are you aware that filing for bankruptcy is a serious action consequences? No Pres	ion with long-term financial and legal
Are you aware that bankruptcy fraud is a serious crime a inaccurate or incomplete, you could be fined or imprison. No Pres	
Did you pay or agree to pay someone who is not an attornoon No Yes. Name of Person Attach Bankruptcy Petition Preparer's Notice, Deck	
By signing here, I acknowledge that I understand the rist have read and understood this notice, and I am aware the attorney may cause me to lose my rights of property if I	that filing a bankruptcy case without an
Signature of Deptor 1	Signature of Debtor 2
Date DAN DAN STREET	Date MM / DD / YYYY
Contact phone	Contact phone
Cell phone [804] 856 2016	Cell phone
Damanal acouse Chan To	I

Certificate Number: 12459-VAE-CC-028199569



CERTIFICATE OF COUNSELING

I CERTIFY that on October 12, 2016, at 4:43 o'clock PM PDT, George Yarid received from Abacus Credit Counseling, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Eastern District of Virginia, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: October 12, 2016 By: /s/Amanda Alumbaugh

Name: Amanda Alumbaugh

Title: Credit Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

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Fill in this information to identify your case:	
Debtor 1 COOC TO Middle Name Day Name	
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: District of	
Case number	☐ Check if this is an
(If known)	amended filing
Official F 4000	
Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical In	formation 12/15
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible t information. Fill out all of your schedules first; then complete the information on this form. If you are filing amen- your original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	for supplying correct
Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)	: 194,000
1a. Copy line 55, Total real estate, from Schedule A/B	
1b. Copy line 62, Total personal property, from Schedule A/B	· 7,695
1c. Copy line 63, Total of all property on Schedule A/B	201,645
Part 2: Summarize Your Liabilities	
	Your liabilities
	Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	, 16,595
	40077
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	s /0/0/)
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ 5 2/151
Your total liabiliti	3
	27991
Part 3: Summarize Your Income and Expenses	228,90
	2400 00
Part 3: Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	2400,00
Schedule I: Your Income (Official Form 106I)	1885 00

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Debtor 1 George ANTI
First Name Unicide Name Last Name

Case number (if known)_____

P	art 4: Answer These Questions for Administrative and Statistical Records	
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?	
	No. You have nothing to report on this part of the form. Check this box and submit this form	
7.	What kind of debt do you have?	
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose.	individual primarily for a personal, ses. 28 U.S.C. § 159.
	Your debts are not primarily consumer debts. You have nothing to report on this part this form to the court with your other schedules.	t of the form. Check this box and submit
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	come from Official
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	gape gapanears is an inter-control and an inter-control and administrative of the SM page gapanes. An appropriate to the SM - PP No.
		Total claim
	From Part 4 on Schedule E/F, copy the following:	
	9a. Domestic support obligations (Copy line 6a.)	1077000
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	· 1077
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	; <u> </u>
	9d. Student loans. (Copy line 6f.)	s
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	: <u> </u>
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$
	9g. Total. Add lines 9a through 9f.	: 1,077,00

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Debtor 1 Check if this is amended filing Check if this is amended fil	
Debtor 2 (Spouse, if filing) First Name United States Bankruptcy Court for the: Case number Case number Check if this is amended filing Official Form 106A/B Schedule A/B: Property In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pawrite your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in	
Debtor 2 (Spouse, if filing) First Name United States Bankruptcy Court for the: Instrume United States Bankruptcy Court for the: Instrume Case number Check if this is amended filing Official Form 106A/B Schedule A/B: Property 12/1 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pawrite your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In	
Case number Check if this is amended filing Official Form 106A/B Schedule A/B: Property In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pawrite your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In	
Check if this is amended filing. Official Form 106A/B Schedule A/B: Property In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pawrite your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In	
Official Form 106A/B Schedule A/B: Property 12/1 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pawrite your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in	
Official Form 106A/B Schedule A/B: Property In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pawrite your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in	o on
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category where you think it fits best. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pawrite your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in	15
	ges,
1 Do you own or have any legal or equitable interest in any residence, building, land, or similar property?	
	. /
U No. Go to Part 2. Ures. Where is the property?	-t1
What is the property? Check all that apply. Do not deduct secured claims or exemptions.	W7 Pùt
307 Show Creek Living Single-family home the amount of any secured claims on Schedu.	
Street address, if available or other description	1
Henry (a) VA 2373 Manufactured or mobile home Current value of the current value of the entire property?	_ /
Land \$ 177.00 \$	2
Investment property Describe the nature of your bwyershi	∛ ∑ (
City State ZIP Code Timeshare To I over House interest (such as fee simple, tenancy the entireties, or a life estate), if know	by
Who has an interest in the property? Check one.	K
HENRICO Webter 1 only RF MODIFICATION	74
County Debtor 2 only	
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community proper (see instructions)	771
Other information you wish to add about this item, such as local 1.	30 Pl
property identification number:	7
If you own or have more than one, list here: What is the property? Check all that apply. Do not deduct secured claims or exemptions	aN.
Single-family home the amount of any secured claims on Schedule	le D:
1.2. Street address, if available, or other description Duplex or multi-unit building Creditors Who Have Claims Secured by Prop	erty.
☐ Condominium or cooperative Current value of the Current value of	
☐ Manufactured or mobile home entire property? portion you ow Land \$ \$	'II F
Investment property	
City State ZIP Code Timeshare Describe the nature of your ownershi	
Other the entireties, or a life estate), if know	
Who has an interest in the property? Check one.	
Debtor 1 only Debtor 2 only	
County Dector 2 only Debtor 1 and Debtor 2 only Check if this is community proper	
☐ At least one of the debtors and another (see instructions)	
Other information you wish to add about this item, such as local	ty
property identification number:	ty

Debtor 1	Case 16-35047-KRH Doo	C 1 Filed 10/13/16 Entered 10/13/ Document Page 13 of 75 Case number (iii)	
1.3.	Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$
	City State ZIP C		Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.
	County	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	Check if this is community property (see instructions)
		Other information you wish to add about this ite property identification number:	em, such as local
2. Add t you h	have attached for Part 1. Write that num	for all of your entries from Part 1, including any entrie	s for pages s [92,000] OUND 37,00 OUND 37,00 PISPUTE REMODIFIED AMOUNT
you own 3. Cars	that someone else drives. If you lease a v , vans, trucks, tractors, sport utility veh lo	Iterest in any vehicles, whether they are registered or rehicle, also report it on Schedule G: Executory Contracts licles, motorcycles	not? Include any vehicles and Unexpired Leases.
□ Y 3.1.	Make: Model: Year: Approximate mileage: 203, 00 Other information: Light Spring Leaf Tivamid	Who has an interest in the property? Check one. HC Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) FLAW TO EXCLUSE QUE Make TWS VE	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? \$ 4900, CO \$ \$ 4900, CO \$ \$ 4000, CO
If you	wown or have more than one, describe he Make: Model: Year: Approximate mileage: Other information:	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?
	LIEN WITH KANS	instructions) P/QN- Bo-Hh UNOR	to exclude vehicles which from Detemption

Page 14 of 75 Case number ut known Debtor 1 Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 3.3. Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only portion you own? entire property? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) Who has an interest in the property? Check one. 3.4. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories □ No Yes Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Make: 4.1. the amount of any secured claims on Schedule D: Debtor 1 only Creditors Who Have Claims Secured by Property. Model: Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? ☐ Check if this is community property (see instructions) If you own or have more than one, list here: Who has an Interest in the property? Check one. Do not deduct secured claims or exemptions. Put 4.2. Make: the amount of any secured claims on Schedule D: Debtor 1 only Creditors Who Have Claims Secured by Property. Model: Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another ☐ Check If this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

Doc 1

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Debtor 1

First Name Middle Name Last Name Last Name Case number (if known)______

Do yo	busehold goods and furnishings amples: Major appliances, furniture, linens, china, kitchenware No Yes Describe O = Conicon Actor The following items? Debton's LAW Exemption Exemption The properties of the following items? And the following it	Current value of the portion you own? Do not deduct secured claims or exemptions.
	amples: Major appliances, furniture, linens, china, kitchenware	
	Ves. Describe Re-Pigenaten	\$ 150,00
7. Ele	ectronics	
	amples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
	Yes. Describe Television	s /00,00
8. C ol	liectibles of value	
_	amples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collections	450,00
ō		\$
9. Eg i	uipment for sports and hobbies	
	amples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	Yes. Describe	s
10. Fi n	earms	_
	amples: Pistols, rifles, shotguns, ammunition, and related equipment	
	No Yes, Describe,	\$
11. Cla	othes From at	_
	Amples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No. Yes. Describe	1000.00
D	Yes. Describe 20 Suits, 10 pAin PANTS 20 Doveds shirts	s_//
12. Jev Exa	/ welry amples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
	No Yes. Describe	\$
	n-farm animals amples: Dogs, cats, birds, horses	and the state of t
	No M C IO	٦.
ч	Yes, Describe	\$
14. An ;	y other personal and household items you did not already list, including any health aids you did not list	4
	No EXEMPT	2 2 MM M
	Yes. Give specific MASh AND DRY EN	\$ 500.50
	ld the dollar value of all of your entries from Part 3, including any entries for pages you have attached Part 3. Write that number here	\$2,000,00

Debtor 1 First Name	Micide Name Last Name	pocument Pag	Case number (if known)	
	Your Financial Assets ny legal or equitable interest in	any of the following?		Current value of the portion you own?
	ou have in your wallet, in your hon	ne, in a safe deposit box, a	nd on hand when you file your petiti	Do not deduct secured claim or exemptions.
Yes			Cash	5
17. Deposits of money Examples: Checking and othe No	g, savings, or other financial accou er similar institutions. If you have m	unts; certificates of deposit; nultiple accounts with the sa Institution name:	shares in credit unions, brokerage lame institution, list each.	nouses,
- Tes		Mary Force	at Bank ISME	344768 R50,06
	17.1. Checking account:	7/00/10	vo peculit	\$ 100.00
	17.2. Checking account:	<i>X</i> /	y o procodury	\$ <u>700,00</u>
	17.3. Savings account:			\$
	17.5. Certificates of deposit:			\$
	17.6. Other financial account:			
	17.7. Other financial account:			
	17.8. Other financial account:			
	17.9. Other financial account:			\$
	ds, or publicly traded stocks ds, investment accounts with brok Institution or issuer name:	1	t accounts	
an LLC, partnershi	p, and joint venture Name of entity:	prated and unincorporated		
Yes. Give specifi information abouthem	, , , ,	V_J	0%	% \$

Case 16-350		6 Entered 10/13/16 11:11:10 Page 17 of 75 Case number (# known)	
Negotiable instruments i		ory notes, and money orders.	\$ \$
No Yes. List each	A, ERISA, Keogh, 401(k), 403(b), thrift savings acc	counts, or other pension or profit-sharing plans	
account separately.			ë
	401(k) or similar plan:		\$
	Pension plan:		•
			\$
			\$
	-		\$
			\$
	repayments deposits you have made so that you may continue ith landlords, prepaid rent, public utilitles (electric,		
☐ Yes	Institution name or individual:		
	Electric:		\$
	Gas:		\$
	Heating oil: Very Security deposit on rental unit:		\$
	Prepaid rent:		s
	Telephone:		\$
	Water:		\$
	Rented furniture:		\$
	Other:		\$
23. Annuities (A contract fo	a periodic payment of money to you, either for life	or for a number of years)	
☐ Yes	Issuer name and description:		
			\$
			\$ \$

Case 16-35047-KRH	Doc 1 Filed 10/13/16 Enter Document / Page 18	ered 10/13/16 11:11:10 3 of 75	Desc Main
Debtor 1 First Name Gliddle Name	Last Name	Case number (if known)	
26 U.S.C. §§ 530(b)(1), 529A(b), and	account in a qualified ABLE program, or unde 529(b)(1). ion name and description. Separately file the reco		s): \$
			\$ \$
25. Trusts, equitable or future interests exercisable for your benefit	in property (other than anything listed in line	1), and rights or powers	
D You Change is a	4 (1/)		
Yes. Give specific information about them	NH		\$
	ade secrets, and other intellectual property obsites, proceeds from royalties and licensing agre	eements	
O No	,		, No Pollare
Yes. Give specific information about them	ory eous George St	public B	No PollAra
27. Licenses, franchises, and other gen Examples: Building permits, exclusive	neral intangibles licenses, cooperative association holdings, liquor	HCEESI S NOVV licenses, professional licenses	·
No Ves. Give specific	usiness License Fo	n my TARI	, No Po//An
<u> </u>	45/1005 = 17001730	BUSINESS	\$ V 15 UCC -
Money or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you			
Yes. Give specific information about them, including whethe		Federal:	\$
you already filed the returns	N/H	State:	\$
and the tax years	7 7 1 0	Local:	\$
	ony, spousał support, child support, maintenance,	divorce settlement, property settleme	ent
☐ Yes. Give specific information			
	Λ , Λ	Alimony:	\$
		Maintenance:	\$
	V • V •	Support: Divorce settlement:	\$ \$
		Property settlement:	\$
	surance payments, disability benefits, sick pay, vanpaid loans you made to someone else	acation pay, workers' compensation,	
No Sudai Security benefits, us	phase to annotic elac		
☐ Yes. Give specific information	. .		
Too. Give specific information	1/1		\$

Case 16-35047-KRH	Doc 1 Filed 10/13/1 Document F	6 Entered 10/13/16 11:11:10 Page 19 of 75	Desc Main
Debtor 1 First Name Middle Name	Last Name	Case number (if known)	
31. Interests in insurance policies Examples: Health, disability, or life insuran	nce; health savings account (HSA)); credit, homeowner's, or renter's insurance	
☐ No☐ Yes. Name the insurance company	Company name:	Beneficiary:	Surrender or refund value:
of each policy and list its value	. A	bondiday.	e
			\$
	7017		\$
32. Any interest in property that is due you if you are the beneficiary of a living trust, or property because someone has died.		nce policy, or are currently entitled to receive	•
Yes. Give specific information] s
33. Claims against third parties, whether o	r not you have filed a lawruit or	made a demand for nevment	
Examples: Accidents, employment dispute	es, insurance claims, or rights to s		L Ma Dalla
No No Ves. Describe each claim	Filed A 4	AWSUIT FOR proporty	1 Amount
		being story	s ////of/
34. Other contingent and unliquidated clair to set off claims No	ns of every nature, including co	unterclaims of the debtor and rights	9,61
Yes. Describe each claim	NA		s
35. Any financial assets you did not alread	y list		
□ No	G LC Chi	185, Wordliken Fitte	60000
Yes, Give specific information	GOZT CAU	134, Worder par Box	; // O O P.
36. Add the dollar value of all of your entri- for Part 4. Write that number here	es from Part 4, including any en	· · ·	1,950.00
	5 h 4 15 a 4 War 5		I d - d - I - D d - d
Part 5: Describe Any Business	Related Property You Ov	vn or Have an Interest In. List any r	eal estate in Part 1.
37. Do you own or have any legal or equita 13. Go to Part 6.	ble interest in any business-rela	ated property?	
Yes. Go to line 38.			
			Current value of the portion you own? Do not deduct secured claims
38. Accounts feceivable or commissions y	homza vhegde un		or exemptions.
UNO	Ou alleady samed		1 A
Yes, Describe	VH		s <i>W</i>
39. Office equipment, furnishings, and sup	plies		
Examples: Business-related computers, softwar	re, moderns, printers, copiers, fax mach	nines, rugs, telephones, desks, chairs, electronic devices	1/1
Yes. Describe	A		s
	<u> </u>]

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Debtor 1 First Name Middle Name Lost Name Case number (#Anown)	
40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade	
Q No □ Yes. Describe	\neg
1041	
41. Inventory	
☑ No ☐ Yes. Describe	
1 168. Describe	
42. Interests in partnerships or joint ventures	
Survivorsity: Yes. Describe Name of entity: % of ownership:	
Name of entity: % of ownership:	\$
%	\$
%	\$
43. Customer lists, mailing lists, or other compilations	
Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
□ No	-
Yes. Describe	\$
44. Any bysiness-related property you did not already list	
D-166	
Yes. Give specific information	\$
	\$
	\$
	\$
	\$
45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached	3
for Part 5. Write that number here	
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest I if you own or have an interest in farmland, list it in Part 1.	n.
46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?	Max
No. Go to Part 7.	
Yes. Go to line 47.	Current value of the
	portion you own?
of Form authority	Do not deduct secured claims or exemptions.
47. Farm animals Examples: Livestock, poultry, farm-raised fish	
L No	- 1 A
☐ Yes,	
	*

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obtor 1 Case number (if known) Case number (if known)	
Crops—elther growing or harvested No	
Yes. Give specific information	s
Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No	
Yes	\$
Farm and fishing supplies, chemicals, and feed	
□ No □ Yes	
	\$
Any farm- and commercial fishing-related property you did not already list	
Yes. Give specific information	\$
Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached	\$ 5
for Part 6. Write that number here	
Describe All Property You Own or Have an Interest in That You Did Not Lis	: Above
Do you have other property of any kind you did not already list? Exemples: Season tickets, country club membership	
□ No	; <u>300.00</u>
Yes. Give specific Bed information	\$ <u>-</u>
	\$ \$
Add the dollar value of all of your entries from Part 7. Write that number here	\$
Add the dollar value of all of your entries from Part 7. Write that number here	\$
	\$→ \$ \$\$\$ \$\$0, ♥ ₩
List the Totals of Each Part of this Form	;
Part 1: Total real estate, line 2	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
Part 1: Total real estate, line 2 Part 2: Total vehicles, line 5	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
Part 1: Total real estate, line 2 Part 2: Total vehicles, line 5 Part 3: Total personal and household items, line 15	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
Part 1: Total real estate, line 2 Part 2: Total vehicles, line 5 Part 3: Total personal and household items, line 15 Part 4: Total financial assets, line 36	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
Part 1: Total real estate, line 2 Part 2: Total vehicles, line 5 Part 3: Total personal and household items, line 15 Part 4: Total financial assets, line 36 Part 5: Total business-related property, line 45	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
Part 1: Total real estate, line 2 Part 2: Total vehicles, line 5 Part 3: Total personal and household items, line 15 Part 4: Total financial assets, line 36 Part 5: Total business-related property, line 45 Part 6: Total farm- and fishing-related property, line 52	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
Part 1: Total real estate, line 2 Part 2: Total vehicles, line 5 Part 3: Total personal and household items, line 15	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
Part 1: Total real estate, line 2 Part 2: Total vehicles, line 5 Part 3: Total personal and household items, line 15 Part 4: Total financial assets, line 36 Part 5: Total business-related property, line 45 Part 6: Total farm- and fishing-related property, line 52	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

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Fill in this information to identify your case:			
Debtor 1 First Name Middle Name	Last Name		
Debtor 2 (Spouse, If filing) First Name Middle Name	Last Namé		
United States Bankruptcy Court for the:D	istrict of		
Case number(If known)			Check if this is an amended filing
Official Form 106C			
Schedule C: The Proj	erty You	Claim as Exempt	04/16
Be as complete and accurate as possible. If two ma Using the property you listed on Schedule A/B: Prop space is needed, fill out and attach to this page as r your name and case number (if known).	perty (Official Form 106A	/B) as your source, list the property that y	you claim as exempt. If more
For each item of property you claim as exempt, specific dollar amount as exempt. Alternatively, of any applicable statutory limit. Some exemptic retirement funds—may be unlimited in dollar an limits the exemption to a particular dollar amouly would be limited to the applicable statutory amould be limited to the applicable statutory amou	you may claim the full ons—such as those for nount. However, if you cont and the value of the j	fair market value of the property being health aids, rights to receive certain b :laim an exemption of 100% of fair ma) exempted up to the amount enefits, and tax-exempt rket value under a law that
Part 1: Identify the Property You Claim			
7.20	· · · · · · · · · · · · · · · · · · ·		<u></u> .
Which set of exemptions are you claiming? Ou are claiming state and federal nonban You are claiming federal exemptions. 11 t.	kruptcy exemptions. 11 l		
2. For any property you list on Schedule A/B t	hat you claim as exemp	ot, fill in the information below.	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
00 10	Copy the value from Schedule A/B	Check only one box for each exemption.	Anna Malalana
Brief 79 Menuedes		-ds 3995,00	Poor Debjor
description: Line from	3,995	100% of fair market value, up to any applicable statutory limit	EXEMPLOY
Schedule A/B: GNAND	, 40 a.00	-400 co	POOR Western
Brief OSCARPION	s	100% of fair market value, up to	Examplia
Schedule A/B:	950,00	any applicable statutory limit	O Contra
Brief description:	s_700,00	Zs 470.00	foon woller
Line from ASSCHY Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	Exemption
Are you claiming a homestead exemption of the state	of more than \$160,375?		

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

Q-140

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

☐ No

Yes

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Debtor 1

Source Alexander Mozero

First Name Middle Name Last Name

Case number (# known)

Part 2:

Additional Page

Brief description: Line from Schedule ARE: Brief description: Line from Schedule ARE: Brief description: Line from Schedule ARE: Brief description: Line from Schedule ARE: Brief description: Line from Schedule ARE: Brief description: Line from Schedule ARE: Brief description: Line from Schedule ARE: Brief description: Line from	Brief description of the property and line	Current value of the	Amount of the exemption you claim	Specific laws that allow exemption
description: Line from Schedule AR: Brief description: Line from Schedule AR: Brief description:	on Schedule A/B that lists this property		Check only one box for each exemption	· · · · · · · · · · · · · · · · · · ·
any applicable statutory limit Brief description: Line from Schedule AB: Brief description: Line from Sche		1.0	2, <u>12</u>	box Debter Exemplus
Line from Schedule A/B: Brief description: Line from Schedule A/		/ICA NA		- 10 O- H11
Brief description: Line from Schedule A/B: Brief description: Line f		L s	<u> </u>	poor Deorn
Brief description: Line from Schedule A/B: Brief Sched	Schedule A/B:	0		
Brief description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Brief descri	Brief WASh give Dry	gn 300,00	300,00	•
Brief description: Line from Schedule A/B: Brief A/B: Brie	Line from	<u> </u>		
Line from Schedule AB: Brief description: Line from Schedule AB: Brief description: Line from Schedule AB: Brief Couch Schedule AB: Brief Couc	Brief QOSVHS	\$ 1,000,00		Roon Debton
description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Brief descripti	Line from	de o		Exemption
Brief description: Line from Schedule A/B: Brief description: Line f		s, 800,00	800,00	foor Debton
Brief description: Line from Schedule A/B: Brief description: Br	Line from			
Brief description: Line from Schedule A/B: Brief description: Brief descriptio	Brief Gott Clubs	\$200.00	2 00.00	Poon Dobten
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ned MA	Schedule A/B:			
Brief description: \$ \$ \$ 100% of fair market value op to	description:	\$	☐ 100% of fair market value up to	
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Fill in this information to identify your case	3:				
Debtor 1 Conge Alsa First Name Middle Na	awen ya	THE THE			
Debtor 2 (Spouse, if filing) First Name Middle No	ame Last Na	une			
United States Bankruptcy Court for the:	District of				
Case number				☐ Check if this is an	
(If known)				amended filing	
Official Form 106D					
Schedule D: Creditors	s Who Have	e Claims Secur	ed by Prope	ertv 12/15	
Be as complete and accurate as possible.	If two married people	are filing together, both are e	qually responsible for	supplying correct	-
information. If more space is needed, copy additional pages, write your name and case		fill it out, number the entries,	and attach it to this fo	orm. On the top of any	
Do any creditors have claims secured by	v vour property?				
No. Check this box and submit this form		other schedules. You have noth	ing else to report on thi	s form.	
Yes. Fill in all of the information below.					
Part 1: List All Secured Claims		<u></u>			
2. List all secured claims. If a creditor has m			" "	Column B Column C Value of collateral Unsecured	17
for each claim. If more than one creditor hat As much as possible, list the claims in alph			Do not deduct the	that supports this portions claim If any	?
21 Crupy Motorato	ON NYMe/	that secures the claim:	171,295		
oraditor's Maine					_
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Flontin 33416— City State ZIP-Code	Upliquidated				
City State JP Code Who owes the debt? Check one.	Disputed Nature of lien. Check a	ali that annu			
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Debtor 2 only	car loan)	as tax lien, mechanic's lien)			
Debtor 1 and Debtor 2 only At least one of the debtors and another	Judgment lien from	a lawsuit			
☐ Check if this claim relates to a /	Other (including a rig	ght to offset)	_		
Date debt was incurred	Last 4 digits of accou	int number 185	0	2	
22 Spring Coof Finning	Describe the property	that secures the claim:	,	;	_
GO NW 2ND Street	99 monco	elet 1109mm/	7,4 00 ,0	0	
Number Streety T					į
EVANSUIR ANDIQUA	Contingent	s, the claim is. Check an that apply	habit		
City State ZIP Code	☐ Unliquidated ☐ Disputed	e, the claim is: Check all that apply	0 000		
Who owes the debt? Check one.	Nature of lien. Check a	all that apply.			
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Debtor 2 only Debtor 1 and Debtor 2 only	car loan) Statutory lien (such :	as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a				
Check if this claim relates to a	Other (including a rig	grit to onset)	1/0/01/	. .	
Date debt was incurred	Last 4 digits of accou	int number	40114	JN105	_
Add the dollar value of your entries in C			s / 2	17011	

Case number (# km Column A Column B Column C **Additional Page** Amount of claim Value of collateral Unsecured Part 1: After listing any entries on this page, number them beginning with 2.3, followed that supports this portion Do not deduct the by 2.4, and so forth. claim value of collateral. If any 60,00 Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply Contingent City ZIP Code Unliquidated Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only Ap agreement you made (such as mortgage or secured Debtor 2 only car loan) Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) ☐ Check if this claim relates to a Don't have Th community debt Date debt was incurred Last 4 digits of account number Describe the property that secures the claim: Creditor's Name As of the date you file, the claim is: Check all that apply. Contingent Unliquidated State ZIP Code ☐ Disputed Who owes the debt? Check one. Nature of lien, Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured) Debtor 2 only car loan) Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) ☐ At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Describe the property that secures the claim: Creditor's Name As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated ZIP Code Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) ☐ Check If this claim relates to a community debt Last 4 digits of account number Date debt was incurred Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

Doc 1

Document

Page 25 of 75

Case 16-35047-KRH Doc 1 Page 26 of 75 Document Case number (if kno Part 2: List Others to Be Notified for a Debt That You Aiready Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. On which line in Part 1 did you enter the creditor? Last 4 digits of account number State On which line in Part 1 did you enter the creditor? Last 4 digits of account number 7 City State ZIP Code On which line in Part 1 dld you enter the creditor? Last 4 digits of account number Name Number ZIP Code On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number Number Street City ZIP Code On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number _ Number ZIP Code City State On which line in Part 1 did you enter the creditor? Last 4 digits of account number _ Name Number Street

City

ZiP Code

State

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Fi	Il in this information to identify your case:			
	ebort George Alexand	y years		
"	First Name Middle Name	Last Name		
	ebtor 2 pouse, if filing) First Name Middle Name	Last Name		
U	nited States Bankruptcy Court for the: Distri	ct of		Objects (CALIFORNIA
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(11	(known)			arrichaed ming
\bigcirc	fficial Form 106E/F			
_				
S	chedule E/F: Creditors W	ho Have Unsec	ured Claims	12/15
List A/E cre nee any	as complete and accurate as possible. Use Part of the other party to any executory contracts or under the other party to any executory contracts or under the other party (Official Form 106A/B) and on Schedu ditors with partially secured claims that are listed ided, copy the Part you need, fill it out, number the additional pages, write your name and case number that are listed that the page is a secure of the other pages.	expired leases that could result le G: Executory Contracts and I in Schedule D: Creditors Who he entries in the boxes on the lease heer (If known).	t in a claim. Also list executory contro Unexpired Leases (Official Form 106G Have Claims Secured by Property. If r	acts on <i>Schedule</i>). Do not include any nore space is
1.	Do any creditors have priority unsecured claims No. Go to Part 2.	against you?		4
	Yes.			
2.	List all of your priority unsecured claims. If a cre	ditor has more than one priority u	nsecured claim. list the creditor separate	ly for each claim. For
	each claim listed, identify what type of claim it is. If a	claim has both priority and nonp	riority amounts, list that claim here and sl	now both priority and
	nonpriority amounts. As much as possible, list the clunsecured claims, fill out the Continuation Page of F			
	(For an explanation of each type of claim, see the in		•	
			•	Priority Nonpriority
	V 11 1/7-05	91420	12m 1	mount amount
2\	VORTZON/1+70	Last 4 digits of account number	$\frac{1}{2}$	120CL
	Priority Creditor's Name	•	2010	•
	F. O DOX 15/0	When was the debt incurred?	0010	
	O BERHANDAY NY	As of the date you file, the claim	le! Check all that anniv	;
	122/2-5/24	Contingent	iso officer of the apply.	;
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	Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations	Ciaiii.	,
	At least one of the debtors and another	Taxes and certain other debts y	ou owe the government	
	Check if this claim is for a community debt	Claims for death or personal inju	- A	
	is the claim subject to offset?	intoxicated D/SO	wto Ament Property	21//
	□ №	Other. Specify	W = V 31.12.	41/
- •	Yes			00
2.2/	Revenue Spaup	Last 4 digits of account number	\$ 0 / /• \$	\$
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	000 Caerejan 01/10	Contingent	1 is: Oneok all trial apply:	1
	City State Z/P Code	Unliquidated	(AP)	1
	Who incurred the debt? Check one.	Disputed	(DAL)	RAPA .
	Debtor 1 only	Type of PRIORITY unsecured	claim:	XXIII
	Debtor 2 only	Domestic support obligations	Ciani.	i 1
	Debtor 1 and Debtor 2 only	Taxes and certain other debts y	ou owe the government	' <i>l</i>
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	Is the claim subject to offset?	Other, Specify	a row 1 of and	
	U No □ Yes		,	

	Case 16-35047-KRH Doc 1	Filed 10/13/16 Entered 10/13/16	11:11:10 Desc N	⁄lain
	Mary Mary	Dogument Page 28 of 75		
Debto	LI USONGE HIRJANDOR	Case number (# known)	,	
2001	First Name Middle Name Last Name	Out Halling (Innown)		
Par	Your Brianity Unsecured Claims	– Continuation Page		
Atte	r listing any entries on this page, number them i	beginning with 2.3, followed by 2.4, and so forth.	Total claim Priority amount	Nonpriority amount
<u> </u>	(1.1)	1/x Fana	0.00	
\mathbf{M}	HSSE PERVALL	Last 4 digits of account number	s 6,058	s
	Prigate Creditor's Name / 1 04 / Cust	660 H	7	
	1410 1011 27hay 3416	When was the debt incurred?		
	Number Street Colored OC	▼ —		
	FIVE COLUMBO	As of the date you file, the claim is: Check all that apply.		
	Denven XXXX	Contingent		
	City State ZIP Code	Unliquidated		
		O disputed		
	Who incurred the debt? Check one.			
	D-Deptor 1 only	Type of PRIORITY unsecured claim:		
	Debtor 2 only	☐ Domestic support obligations		
	Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government		
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		U Other. Specify		
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	DAIVA OT FINGEL	Last 4 digits of account number		\$
	DABEX YXXXX	······································	•	
	Number State)	When was the debt incurred?	•	
	EL POSO / EVAL	As of the date you file, the claim is: Check all that apply.		
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	□ yd			
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\sqrt{I}	Suntout Rock	70 11	.74 ma	•
	Priority Creditor's Name	Last 4 digits of account number $2 \frac{1}{2} 1$	PRIVILLY	a
	1013 West BOOM	When was the debt incurred?	•	
	Number Street	Autieu was nie depr inchried?	DRTWAHLI	
	RICHMUM. VA	As of the date you file, the claim is: Check all that apply.	FISION	
	6/a. Ollar 100 2306	Contingent	•	
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	— Sheek is and claim is for a community debt	Other. Specify	rye unjec	une
	is the claim subject to offset?	•		
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	☐ Yes		and making the distance of the second	

Case 16-35047-KRH Doc 1 File	d 10/13/16 Entered 10/13/16 11:11:10 Desc Main Ment Page 29 of 75
Debtor 1 SEORGE ALRIANOEN	Case number (# known)
Part 2: Your NONPRIORITY Unsecured Claims — C	Continuation Page
After listing any entries on this page, number them beginn	
	ng with 4.4, followed by 4.0, and so forth.
1 HMCH	Last 4 digits of account number
2269 SAW Mill RO	AD When was the debt incurred?
Number Street Gun New York	As of the date you file, the claim is: Check all that apply.
City State ZIP Code	☐ Contingent ☐ Unliquidated
Who incurred the debt? Check one.	D Seputer
Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Student loans ☐ Objections arising out of a separation agreement or divorce that
☐ Check if this claim is for a community debt	you did not report as priority claims
is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify Other Specify
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VI Dett Recovery Solgtin	Last 4 digits of account number DY LOGO 000 7
Noapriority Creditors Name 900 Menchants Concount	When was the debt incurred? Why www No
humber sign New York	1/590As of the date you file, the claim is: Check all that apply.
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Who incurred the debt? Check one.	Unliquidated Disputed
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Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim: Student loans
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts
is the claim subject to offset?	Other. Specify CONTRACTIVELY
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V VOD TRAN INTERNAL	Last 4 digits of account number 1286069 s
Nongdority Creditor's Name	When was the debt incurred? Aug 29/6
Number Street	As of the date you file, the claim is: Check all that apply.
City Starte ZIP Code	Contingent DWED
Who incurred the debt? Check one.	☐ Unliquidated
Debtor 1 only	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim: Student loans
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims
Check if this claim is for a community debt	Debts to pension or profit sharing plans and other similar debts
is the claim subject to offset?	Somer. Specify Physics By L
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Destor 1 Set 18 June		3/16 Entered 10/13/16 11:11:10 Desc Main Page 30 of 75
List All of Your NONPRIORITY Unsocured Claims	DEORGE HISTORICE POHOL	
3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Ver		Case Harrist (II North)
No. You have nothing to report in this part. Submit this form to the court with your other schedules.	Part 2: List All of Your NONPRIORITY Unsecured Claims	
4. List all of your inorpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one condition unsecured claim. But the creditor separately for each claim. For each claim listed, identify what type of claim is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim. But the other creditors in Part 3. If you have more than three norpriority unsecure claims is not the Continuation Fage of Part 2. Continuation Fage of Part 2. Particular claim. But the other creditors in Part 3. If you have more than three norpriority unsecure claims in the Continuation Fage of Part 2.	3. Do any creditors have nonpriority unsecured claims against you	?
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Last 4 digits of account number Super State Stat	claims nil out the Continuation Page of Part 2.	9
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that you did not report as priority claims betts to pension or profit-sharing plans, and other similar debts Comcass	At least one of the debtors and another	
Common Non-priority Creditor Name	☐ Check if this claim is for a community debt	
Comcas Able Noperially prepared Name Number Street As of the date you file, the claim is: Check all that apply. City #### Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Nonpricipl Capitler's Name Nonpriciple Capit		
Noperindity Frederick Name	_ /	Other, Specify
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City ##ONUCO ZiP Code Contingent Unjiquidated Unijquidated Unijquidated	Number Street 3304	As of the date you file, the claim is: Check all that apply.
Who Incurred the debt? Check one. Unjiquidated Disputed	City Llon 16 Co. Signé) ZIP Code	
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Number Street City		Cast 4 digits of account number
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Debtor 1 only	•	
	Debtor 2 only	- Displied
☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another		Type of NONPRIORITY unsecured claim:
☐ Student loans		<u> </u>
Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts	•	
☐ Yes ☐ Other. Specify	—· ···•	Utner: Specify

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btor 1 Pret Name Makde Name Last Name	Case number (# known)
art 3: List Others to Be Notified About a Debt That	You Aiready Listed
example, if a collection agency is trying to collect from you 2, then list the collection agency here. Similarly, if you have it	our bankruptcy, for a debt that you already listed in Parts 1 or 2. For for a debt you owe to someone else, list the original creditor in Parts 1 or more than one creditor for any of the debts that you listed in Parts 1 or 2, list the s to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Ven IZON	On which entry in Part 1 or Part 2 did you list the original creditor?
P.O. Box 15/24 Number Borner New Yeart	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims 2: Creditors with Nonpriority Unsecured Claims
THE PORT OF THE PROPERTY OF TH	Last 4 digits of account number
VexTZen Wheres	On which entry in Part 1 or Part 2 did you list the original creditor?
HUMBER Street H Georgia 30/0/	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
City / State , ZIP Code	Last 4 digits of account number $41286069-000$
SUNTRUST BANK.	On which entry in Part 1 or Part 2 did you list the original creditor?
1013 West Broad	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
RICHMUD, VING/MIG	Claims Second Monte 2: Creditors with Nonpriority Unsecured Monte 2.4 WH3W7
City State ZIP Code	Last 4 digits of account number Secun
BANTO + HMENICA	On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street V2 64 T A	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
79998 - 2038 City State ZIP Code	Claims Last 4 digits of account number
City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
COMCAST CABLE	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Stoples Mills	Part 2: Creditors with Nonpriority Unsecured Claims
City ON X 100 State 1 ZIP Code	Last 4 digits of account number
Deposit ment of Publicat	On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street on 1 (1) 2222	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
HOMING VAT ASSES	Claims
City State ZIP Code	Last 4 digits of account number
Name OCAL S Survey A Property	On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street Caban Nov. Valle	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
- (m) tony I vem wift	Claims
City State ZIP Code	Last 4 digits of account number

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Debtor 1 First Name Midde Name Last Name Case number (# known)

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim	
otal claims	6a.	Domestic support obligations	6a.		
rom Part 1	6b.	Taxes and certain other debts you owe the government	6b.	. 1,077.00	
	6c.	Claims for death or personal injury while you were intoxicated	6c.	. 0	
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+: 39,000,00	
	6e.	Total, Add lines 6a through 6d.	6e.	40,077,00	Sun trust 2no Manta age Unsecured
				Total claim	Subondant to the
otal claims	6f.	Student loans	6f.	, 0	Finot
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.		, 114
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.		
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+, 12/15/.00	
	6j.	Total. Add lines 6f through 6i.	6j.	, 12,15/,00	

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Fill in this information to identify your case:					
Debtor Secure	ASSA ON HON	Light Name			
Debtor 2 (Spouse If filling) First Name	Middle Name	Last Name			
United States Bankruptcy Court for th	e: District of				
Case number(if known)		_			

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

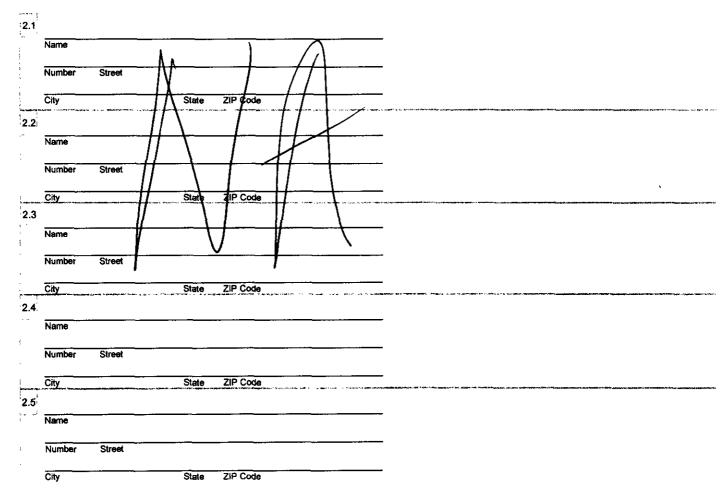
12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - 12 No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for



Page 34 of 75 Debtor 1 Additional Page if You Have More Contracts or Leases Person or company with whom you have the contract or lease What the contract or lease is for 22 Name Number Street City State ZIP Code 2._ Name Number Street City State ZIP Cod 2._ Name Number Street City State ZIP Cod Name Number Street City ZIP Code 2._ Name Number Street City State ZIP Code 2._ Name Number Street City ZIP Code State Name Number Street City ZIP Code State 2._ Name Number Street City State ZIP Code

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Fill in	this information to identify	your case:		
	6000	At or and an	Ymare	
Debto	First Name	Mijddle Name	Last Name	
Debtor (Spous	r 2 e, if filling) First Name	Middle Name	Last Name	
	States Bankruptcy Court for the:			
(If kno	number wn)		_	☐ Check if this is an
		-		amended filing
Offic	cial Form 106H			
	nedule H: Your	Codebtors		12/15
Codeb are fili and nu	tors are people or entities w ng together, both are equall	ho are also liable for any responsible for supply s on the left. Attach the	ng correct information.	e as complete and accurate as possible. If two married people of more space is needed, copy the Additional Page, fill it out, page. On the top of any Additional Pages, write your name and
	you have any codebtors? (e, do not list either spouse	e as a codebtor.)
	No			
:	Yes			
	fithin the last 8 years, have y rizona, California, Idaho, Louis	•	· · •	ry? (Community property states and territories include ashington, and Wisconsin.)
	No. Go to line 3.	, 110 vada, 110 v (110x10	0,1 0010 1100, 1020, 11	son, and videonom,
	Yes. Did your spouse, forme	r spouse, or legal equivale	ent live with you at the tim	e?
	□ No			}
i	Yes. In which community	state or territory did you	live?	Fill in the name and current address of that person.
				:
	Name of your spouse, former s	pouse, or legal equivalent		
	• • •			,
	Number Street			-
			75.0	; ;
	City	State	ZIP Code	,
sh Se	nown in iine 2 again as a coo	lebtor only if that persor D), S <i>chedule E/F</i> (Officia	is a guarantor or cosig	tor if your spouse is filing with you. List the person ner. Make sure you have listed the creditor on dule G (Official Form 106G). Use Schedule D,
•	Column 1: Your codebtor	,		Column 2: The creditor to whom you owe the debt
	1	1 / 1		Check all schedules that apply:
3.1	1/	1 / 11		
	Name	 		Schedule D, line
				Schedule E/F, line
	Number Street			☐ Schedule G, line
	City	State	ZIP Code	The state of the s
3.2	/	1 1 / 1 / 1		Schedule D, line
-	Name		-	Schedule E/F, line
: 	Number Street	++		Schedule G, line
		11 '		GO ONIOGUIE O, III O
	City	State	ZiP Code	
3.3		<u>V</u>		Schedule D, line
	Name	*		☐ Schedule E/F, line
	Number Street		····	Schedule G, line
	City	State	ZIP Code	<u> </u>
	City			

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Debtor 1

Scrape Alexantan	MARIN	Case number (# known)
First Name Middle Name Last Name	, , , , , , , , , , , , , , , , , , , 	

Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt
	Check all schedules that apply:
Name	Schedule D, line
Plakille	Schedule E/F, line
Number Street	Schedule G, line
City State ZIP	Code
Name	Schedule D, line
	Schedule E/F, line
Number Street	□ Schedule G, line
CD. 219	Code
City State ZIP	Code
Name	Schedule D, line
	☐ Schedule E/F, line
Number Street	Schedule G, line
City State ZIP	Code
X	_
Name	Schedule D, line
	Schedule E/F, line
Number Street	Schedule G, line
City State ZIP	Code
	Schedule D, line
Name	Schedule E/F, line
Number Street	Schedule G, line
City State ZIP	Code
	D. Ochodulo D. Kon
Name	Schedule D, line
	Schedule E/F, line
Number Street	Schedule G, line
Chu Cinta 710	Code
City State ZIP	NOTE: The second of the second
Name	Schedule D, line
(Valito	☐ Schedule E/F, line
Number Street	Schedule G, line
City State ZIP	Code
	D 0. 11 D 7
Name	Schedule D, line
	Schedule E/F, line
Number Street	Schedule G, line
City State ZIP	Code

Fill in this information to identify your case:			
Debtor 1			
First Name Middle Name Debtor 2	Last Name		
(Spouse, if filing) First Name Middle Name	Last Name		
United States Bankruptcy Court for the: District of _	· · · · · · · · · · · · · · · · · · ·		
Case number (if known)	_	Check if this is:	
	- H*- A**	☐ An amended filing☐ A supplement showing post	tnetition chanter 13
		income as of the following of	late:
Official Form 106I		MM / DD / YYYY	×
Schedule I: Your Income			12/15
Be as complete and accurate as possible. If two married supplying correct information. If you are married and not if you are separated and your spouse is not filing with yo separate sheet to this form. On the top of any additional Part 1: Describe Employment	filing jointly, and your spouse u. do not include information a	is living with you, include information bout your spouse. If more space is r	on about your spouse. needed, attach a
1. Fill in your employment information.	Debtor 1	Debtor 2 or non-f	lling spouse
If you have more than one job,			
attach a separate page with information about additional Employment status	☐ Employed	☐ Employed	
employers.	□ Not employed	☐ Not employed	
Include part-time, seasonal, or self-employed work.	InHeperox	rNI,	
Occupation may include student or homemaker, if it applies	Co.	NACTOR	
M/ CD Co/ Employer's name	101		
Imployed Employer's address	2921 Wes	twanthe	
Employer's address With	Number Street	Number Street	
n-MaW1	Richmond	VTransa	
Cow Boy.	<u> </u>	€	<u>.</u>
TOXI cause	City State Z	IP Code City	State ZIP Code
How long employed	there? HPRIL O	(U/U	
Part 2: Give Details About Monthly Income	in Needs Reports		
Estimate monthly income as of the date you file this f			ude your non-filing
spouse unless you are separated. If you or your non-filing spouse have more than one empl			
below. If you need more space, attach a separate sheet t		an ampleyers for that person on the in-	
	F	or Debtor 1 For Debtor 2 or non-filing spouse	
List monthly gross wages, salary, and commissions deductions). If not paid monthly, calculate what the mon	(before all payroli thly wage would be. 2.	2,400.00	•
3. Estimate and list monthly overtime pay.	3. +\$_	+	
4. Calculate gross income. Add line 2 + line 3.	4. \$2	2,40000 s]

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		N	1	<i>U.</i>
Debtor 1	George	Hest	WOK ,	THOSE
	First Name	liddle Name	Last Name	

Case number (# known)_____

		For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	→ 4.	2,400,0	2·0 _{\$}	
5. List all payroli deductions:				
5a. Tax, Medicare, and Social Security deductions	5a.	; O	s	
5b. Mandatory contributions for retirement plans	5b.	\$	\$	
5c. Voluntary contributions for retirement plans	5c.	5	\$	
5d. Required repayments of retirement fund loans	5d.		2	ř
5e. Insurance	5e.	. 0	\$	
5f. Domestic support obligations	5f.	: 87	\$	
			•	•
5g. Union dues	5g.	·	Ψ	*
5h. Other deductions, Specify:	5h.	+\$	+ \$	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5	5h. 6.	3 <u>400,00</u>	\$	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0,700,00	\$	•
8. List all other income regularly received:				;
 Net income from rental property and from operating a business, profession, or farm 				1
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	s 0	\$	•
8b. Interest and dividends	8b.	\$	\$	
8c. Family support payments that you, a non-filing spouse, or a depen regularly receive	ident	α		
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$	
8d. Unemployment compensation	8d.	\$	\$	
8e. Social Security	8e.	s	\$	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assis that you receive, such as food stamps (benefits under the Supplementa Nutrition Assistance Program) or housing subsidies.		0		,
Specify:	8f.	<u>s</u>	\$	
8g. Pension or retirement income	 8g.	:0	\$	
8h. Other monthly income. Specify:	8h.	+\$	+\$	1
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	\$	
 Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 	10.	2/400,00+	· [\$]=	\$
 State all other regular contributions to the expenses that you list in Scienciude contributions from an unmarried partner, members of your household. 			mates, and other	
friends or relatives.				
Do not include any amounts already included in lines 2-10 or amounts that a	are not a	vailable to pay expens	-	
Specify:			11. *	3
12. Add the amount in the last column of line 10 to the amount in line 11. T Write that amount on the Summary of Your Assets and Liabilities and Certain				Combined monthly become
13. Do you expect an increase or decrease within the year after you file th	is form?	,		monthly income
Yes. Explain:				

Debtor 1 Debtor 2 (Spouse, if filing) Case number (If known)	Micidie Name Micidie Name Last Name		ded filing nent showing postp as of the following	
Official Form 106J				
Schedule J: You	ur Expenses			12/15
	essible. If two married people are fill ed, attach another sheet to this form			
Part 1: Describe Your Hou	sehold			
1. Is this a joint case?				
So to line 2. Yes. Does Debtor 2 live in a s	separate household?			
☐ No ☐ Yes. Debtor 2 must file	e Official Form 106よ2, Expenses for S	eparate Household of Debtor 2.		
Do you have dependents? Do not list Debtor 1 and Debtor 2. Do not state the dependents' names.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you? No Yes No Yes No Yes No Yes No Yes No Yes No
Do your expenses include expenses of people other than yourself and your dependents?	☐ Yes	the contract of the contract o		
Estimate your expenses as of your	bankruptcy filing date unless you a kruptcy is filed. If this is a supplement			
	n-cash government assistance if you d it on <i>Schedule I: Your Income</i> (Offi		Your expe	nses
The rental or home ownership of any rent for the ground or lot.	expenses for your residence. Include	first mortgage payments and	4. \$)
- If not included in line 4:				
4a. Real estate taxes			4a. \$	<u> </u>
4b. Property, homeowner's, or r	renter's insurance		4b. \$	s)
4c. Home maintenance, repair,	and upkeep expenses		4c. \$	-}

4d. Homeowner's association or condominium dues

Debter 1

George Defonder med Proposition of the Proposition

Case number (# Innown)_____

			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5,	\$
6.	Utilities:		180 00
	6a. Electricity, heat, natural gas	6a.	\$ 100,00
	6b. Water, sewer, garbage collection	6b.	\$ 50.00 2000
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	3
	6d. Other. Specify:	6d.	\$ 125,00
7.	Food and housekeeping supplies	7.	\$ 100.00
8.	Childcare and children's education costs	8.	\$
9.	Clothing, laundry, and dry cleaning	9.	: 35,00
10.	Personal care products and services	10.	\$
11.	Medical and dental expenses	11.	\$_ -0 _
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	: 225,00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.	Charitable contributions and religious donations	14.	s
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		en .
	15a. Life insurance	15a.	s
	15b. Health insurance	15b.	s
	15c. Vehicle insurance	15c.	\$ 225,00
	15d. Other insurance. Specify:	15d.	s
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	: 1
17.	Installment or lease payments:		: 150,00
	17a. Car payments for Vehicle 1	17a.	\$ 150,00
	17b. Car payments for Vehicle 2	17b.	\$ 400.00
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17đ.	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	***
19.	Other payments you make to support others who do not live with you.		
	Specify:	19.	<u>\$</u>
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your incom	e.	
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$4
	20e. Homeowner's association or condominium dues	20e,/	\$

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Debtor 1 Georgia Alexandra Middle Name Last Name Cas	se number (# known)
21. Other. Specify: 54m Fee Exemp	21. +5 9.98
22. Calculate your monthly expenses.	2400.00
22a. Add lines 4 through 21.	22a. \$ 9
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b. \$
22c. Add line 22a and 22b. The result is your monthly expenses.	22c. \$
23. Calculate your monthly net income.	J 400 CO
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. 30//
23b. Copy your monthly expenses from line 22c above.	23b. —\$
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. \$545.00
24. Do you expect an increase or decrease in your expenses within the year after you file the For example, do you expect to finish paying for your car loan within the year or do you expect	
mortgage payment to increase or decrease because of a modification to the terms of your mort	
D 16.	And the second s
Yes. Explain here:	;
/\/\	;
V	! •

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Fill in this information to identify your case:	
Debtor 1 Carrye Smoth Name Las Name	Check if this is:
Debtor 2	☐ An amended filing
(Spouse, if filing) First Name Middle Name Leat Name	☐ A supplement showing postpetition chapter 13
United States Bankruptcy Court for the: District of	expenses as of the following date:
(If known)	MM / DD / YYYY
Official Form 106J-2	
Schedule J-2: Expenses for Separate Hou	sehold of Debtor 2 12/15
Use this form for Debtor 2's separate household expenses ONLY IF Debtor 1 and Debtor	•
Debtor 2 have one or more dependents in common, list the dependents on both Sched only with respect to expenses for Debtor 2 that are not reported on Schedule J. Be as	· · · · · · · · · · · · · · · · · · ·
needed, attach another sheet to this form. On the top of any additional pages, write you	
question.	
Part 1: Describe Your flousehold	
Do you and Debtor 1 maintain separate households?	
No. Do not complete this form. Yes	
2. Do you have dependents?	
Do not list Debtor 1 but list all Yes. Fill out this information for other dependents of Debtor 2 each dependent.	age with you?
regardless of whether listed as a dependent of Debtor 1 on	─────────────────────────────────────
Schedule J. Do not state the dependents'	\ □ No
names.	Yes
	No Yes
V	□ No
<u> </u>	Yes
	No
	Yes
3. Do your expenses include expenses of people other than yourself, your dependents, and Debtor 1?	
Part 2: Estimate Your Ongoing Monthly Expenses	
Estimate your expenses as of your bankruptcy filing date unless you are using this for	m as a supplement in a Chanter 13 case to report
expenses as of a date after the bankruptcy is filed.	A Supplement and Supplement to
Include expenses paid for with non-cash government assistance if you know the value	Your expenses
such assistance and have included it on Schedule I: Your Income (Official Form 1061.) 4. The rental or home ownership expenses for your residence. Include first mortgage pa	X
any rent for the ground or lot.	4. \$
If not included in line 4:	
4a. Real estate taxes	4a. \$
4b. Property, homeowner's, or renter's insurance	4b. \$
4c. Home maintenance, repair, and upkeep expenses	4c. \$
4d. Homeowner's association or condominium dues	4d. \$

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General Hander Smith

Case number (# known)_____

			Your expenses
£	Additional mortgage payments for your residence, such as home equity loans	5 .	\$
Э.	Additional mortgage payments for your residence, such as notice equity loans	J.	
6.	Utilities:		_
	6a. Electricity, heat, natural gas	6a.	\$
	6b. Water, sewer, garbage collection	6b.	\$
	6c. Telephone, cell phone, Internet, satellite, and cable services	6 c.	\$
	6d. Other. Specify:	6d.	\$
7.	Food and housekeeping supplies	7.	\$
8.	Childcare and children's education costs	8.	\$
9.	Clothing, laundry, and dry cleaning	9.	\$
10.	Personal care products and services	10.	\$
11.	Medical and dental expenses	11.	<u></u>
12.	Transportation, include gas, maintenance, bus or train fare. Do not include car payments.	12/	\$
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.	Charitable contributions and religious donations	14.	\$
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
		15a.	•
	15a. Life insurance	\mathcal{L}	3
	15b. Health insurance	150.	\$
		15d.	\$
	15d. Other insurance. Specify:	100,	• •
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		_
	Specify:	16.	\$
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$
18.	Your payments of allmony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 1061).	18.	\$
	• • • • • • • • • • • • • • • • • • • •		\$
19.	, , , , , , , , , , , , , , , , , , , ,	45	•
	Specify:	19.	\$
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your income	•	
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$

Case 16-35047-KRH Doc 1 Document Page 44 of 75 21. Other. Specify: 22. Your monthly expenses. Add lines 5 through 21. The result is the monthly expenses of Debtor 2. Copy the result to line 22b of Schedule J to calculate the total expenses for Debtor 1 and Debtor 2. 22. 23. Line not used on this form. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? ☐ No. ☐ Yes. Explain here:

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					_		
l in this in	formation to ident	ify your case:					
btor 1	(eolge	He gu	n Bay	<u> </u>			
btor 2	First Name	Middle Name	Last Name				
ouse, if filing)	First Name	Middle Name	Last Name		ļ		
ited States E	Bankruptcy Court for th	he: Dist	rict of				
se number known)							
nown,						C	Check if this is
,					_		amended filing
Official	I Form 106	Dec					
Decl	aration /	—— About ar	Individ	ual Da	ebtor's Sch	edules	4014
		About ai	- IIIaivia	adi Di	btol 3 och	icaules .	12/1
two marr	ried people are filli	ng together, hoth a	re equally resnonsi	hie for supp	ying correct informatio	n	
	• •				, .		
	Sign Below						
Did you	u pay or agree to p	pay someone who k	NOT an attorney t	o help you f	ll out bankruptcy forms	?	
11/10	,			,			
	. Name of person				Attach Bankruptcy Petition Pi	reparer's Notice. Declarat	ion, and
					Signature (Official Form 119)	•	
		1.41 45-415	(1		-1 #71 d tab- Ab-1 d d -	41 4	
	penanty of perjury, By ape true and com		e read the summan	у апо вспес	iles filed with this decla	iration and	
	\mathcal{Y}		I Hay				
	//0.00	HWW II	y fun	-γ			
4/7	ヘノメング し	カヤノシレイ// イ/シ					
~(/	// '/ ' '		// x				
Signatu	ure of Distator 1	t	/_ `	re of Debtor 2			
Signatu	ire of District 1	t	/_ `	re of Debtor 2			

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Fill in this information to identify your case.				
Debtor 1 Seeme Hear	an the	72		
First Name Middle Name Debtor 2	Last Rame			
(Spouse, if filing) First Name Middle Name	Last Name			
United States Bankruptcy Court for the: Distri	ict of			
Case number(if known)				Check if this is an
				amended filing
Official Form 107				
statement of Financial Affai	rs for Indiv	iduals Filing 1	or Bankruptcy	04/16
e as complete and accurate as possible. If two mar iformation. If more space is needed, attach a sepa				
umber (if known). Answer every question.	iate short to the for	in on the top of any addi	aona pagos, milo your na	
Charles Basella Stand Very No. 10 and 10				
Part 1: Give Details About Your Marital Sta	atus and Where Y	OU LIVER BEFORE	<u></u>	
What is your current marital status?				
☐ Married				
Not married				
2. During the last 3 years, have you lived anywhere	e other than where v	ou live now?		
I) No				
Yes. List all of the places you lived in the last 3	years. Do not include	where you live now.		
Debtor 1:	Dates Debtor 1	Debtor 2:		Dates Debtor 2 lived there
		П		
1307 Stowey cheet	JUMIA	Same as Debtor 1		Same as Debtor 1
Number Street	_ From	Number Street		From
Richmond VT	_™ PN U	20 <u> </u>		To
2703P	_ ,	•		
City State ZIP Code		City	State ZIP Code	
		Same as Debtor 1		Same as Debtor 1
A	From	N		From
Number Street	To	Number Street		To
				
City State ZiP Code		City	State ZIP Code	
,				
 Within the fast 8 years, did you ever live with a states and territories include Arizona, California, Id 	<mark>spouse or legal equi</mark> taho. Louisiana, Nevad	valent in a community pro da, New Mexico, Puerto Ric	operty state or territory? (C co, Texas, Washington, and \	ommunity property Nisconsin.)
1 000	,	,·	,	,
Yes. Make sure you fill out Schedule H: Your C	Codebtors (Official For	m 106H).		
Part 2: Explain the Sources of Your Income				

Filed 10/13/16 Entered 10/13/16 11:11:10 Doc 1 Page 47 of 75 Document Debtor 1 Case number into 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. Sources of Income **Gross income** Sources of income **Gross income** (before deductions and Check all that apply. Check all that apply. (before deductions and exclusions) exclusions) Wages, commissions, ■ Wages, commissions, From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, Wages, commissions, For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31 Operating a business Operating a business Wages, commissions, Wages, commissions, For the calendar year before that bonuses, tips bonuses, tips (January 1 to December 3 Operating a business Operating a business 5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are fitting a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. in country in 1 11 16 Sources of income Gross income from Sources of income Gross income from each source each source Describe below. cribe below. (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year ugtil the date you filed for bankruptcy: For last calendar year: (January 1 to December 3" For the calendar year before that:

(January 1 to December 31,

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Debtor 1

TEACHE HEAT AND LINE NAME CASE NUMBER (# KNOWN)_____

re eithe	Pr Debtor 1's or Debtor 2's debts primarily consumer de	bts?		
No.	Neither Debtor 1 nor Debtor 2 has primarily consumer of "incurred by an individual primarily for a personal, family, or	debts. Consumer debts a household purpose."	re defined in 11 U.S.C. § 10	1(8) as
	During the 90 days before you filed for bankruptcy, did you	pay any creditor a total of	\$6,425* or more?	
	No. Go to line 7.			
	Yes. List below each creditor to whom you paid a total of total amount you paid that creditor. Do not include child support and alimony. Also, do not include parts	payments for domestic su	ipport obligations, such as	
	* Subject to adjustment on 4/01/19 and every 3 years after	that for cases filed on or a	after the date of adjustment.	
Yes.	Debtor 1 or Debtor 2 or both have primarily consumer of	lebts.		
	During the 90 days before you filed for bankruptcy, did you		\$600 or more?	
	No. Go to line 7.			
			alal amanant man == td 4b . 4	
	Yes. List below each creditor to whom you paid a total of creditor. Do not include payments for domestic support.			
	alimony. Also, do not include payments to an attor			
	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
		•	\$	☐ Mortgage
	Creditor's Name		v	Car
		-		Credit card
	Number Street			Loan repayment
		_		Suppliers or vendo
				Other
	City State ZN-Tob			
	Creditor's Name	_ \$	\$	☐ Mortgage
	Creditor & Maine			Car Car
	Number Street	_		Credit card
				Loan repayment
		-		Suppliers or vendo
	City State ZIP Code			☐ Other
		\$	\$	☐ Mortgage
	Creditor's Name			□ car
		_		Credit card
	Number Street	- ,		Loan repayment
		_		Suppliers or vendo
				— Suppliers or vendor

City

State

ZIP Code

Filed 10/13/16 Entered 10/13/16 11:11:10 Case 16-35047-KRH Doc 1 Document Page 49 of 75 Debtor 1 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. ☐ Yes. List all payments to an insider. Dates of **Total amount** Amount you still Reason for this payment payment paid Insider's Nam Number Street ZIP Code 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Reason for this payment payment Include creditor's name Insider's Name Number ZIP Code insider's Name Number Street

ZIP Code

City

Debtor 1 Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. ☐ No Fill in the details. ☐ Pending On appeal ☐ Concluded Number Stree Case number City 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. Mo. Go to line 11. Yes. Fill in the information below. Value of the property Date Describe the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, seized, or levied. ZIP Code City Date Value of the property Describe the property Creditor's Name Number Street Explain what happened Property was repossessed. Property was foreclosed. Property was garnished. City State ZIP Code Property was attached, seized, or levied.

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Debtor 1 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts of refuse to make a payment because you owed a debt? Yes. Fill in the details. Describe the action the creditor took **Date action Amount** Creditor's Name Number Street Last 4 digits of account number: XXXX-12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors_a court-appointed receiver, a custodian, or another official? 110 ☐ Yes **List Certain Gifts and Contributions** 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Dates you gave Value Describe the gifts the aifts per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 Dates you gave Describe the gifts the gifts per person Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you

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Entered 10/13/16 11:11:10 Doc 1 Filed 10/13/16 Page 52 of 75 Document Debtor 1 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities Describe what you contributed Date you Value that total more than \$600 contributed Charity's Name Number Street State ZIP Code Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Yes, Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: **List Certain Payments or Transfers** 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was madé Person Who Was Paid Number Street ZIP Code Email or website address

Person Who Made the Payment, if Not You.

Case 16-35047-KRH Doc 1 Page 53 of 75 Document Debtor 1 Date payment or Amount of Description and value of any property transferred transfer was made payment Person Who Was Paid Number Street ZIP Code Email or website address Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Q 100 Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was made Person Who Was Paid Number Street City State ZIP Code 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Yes. Fill in the details. Date transfer Description and value of property Describe any property or payments received or debts paid in exchange transferred was made Person Who Received Transfer Number Street ZIP Code City Person's relationship to you Person Who Received Transfer

Number Street

Person's relationship to you

State

ZIP Code

Deblor 1 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary2. (These are often called asset-protection devices.) Yes. Fill in the details. Description and value of the property transferred Date transfer was made Name of trust Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, gphouses, pension funds, cooperatives, associations, and other financial institutions. es. Fill in the details. Type of account or Date account was Last balance before Instrument closed, sold, moved, closing or transfer Checking ☐ Savings Money market Brokerage Other_ Savings ☐ Money market ☐ Brokerage 21. Do you now have or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities oath, or other valuables? Yes. Fill in the details. Do you still Who else had access to It? Describe the contents have it? No. ☐ Yes Name of Financial Institution Number Street City State ZIP Code ZIP Code

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City

State

ZIP Code

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Debtor 1 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Environmental law, if you know it Date of notice Governmental unit Governmental unit Name of alte Number Street City ZIP Code 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. Status of the Court or agency Nature of the case çase Case title ☐ Pending Court Name On appeal Concluded Number Street Case number City Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Employer Identification number** Describe the nature of the business Do not include Social Security number or ITIN. **Employer Identification number** Describe the nature of the business Do not include Social Security number or ITIN. Number Street Dates husiness existed Name of accountant or bookkeeper _ To _ City State ZIP Code

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Debtor 1 **Employer Identification number** Describe the nature of the business Do not include Social Security number or ITIN. Rusiness Name Number Street Name of accountant or bookkeeper Dates business existed From To City ZIP Code 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. OL/No Yes. Fill in the details below. Date issued MM / DD / YYYY City ZIP Code Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. Signature of De Signature of Debtor 2 Date Did you attack additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of person_ Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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f	ill in this inf	ormation to identify	your case:	
	Debtor 1	Gorge First Name	HOLOWY Middle Name	JANUTO Last Name
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
	United States E	Bankruptcy Court for the:	District of _	
İ	Case number (if known)			_

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1:

List Your Creditors Who Have Secured Claims

For any creditors that you listed in Part 1 of Schedule D: Credit information below.	ors Who Have Claims Secured by Property (Offici	al Form 106D), fill in the		
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?		
Creditor's Owen Montgage name: Description of Bank Of NY. Me/low	☐ Surrender the property.	10 A10		
name: Offer of Ny Mellan	Retain the property and redeem it.	matte it		
Description of property securing debt: Finst Montgase	Retain the property and enter into a Reaffirmation Agreement.	Exempt:		
FINS/ Monsy	Retain the property and [explain]: TWS S my child has a farme.	I Plan to Stove it by any mean		
Creditor's Spaling least Financial	☐ Surrender the property.	□ No		
	Retain the property and redeem it.	Xxes		
property securing debt: 99 Mexicof & While	Retain the property and enter into a Reaffirmation Agreement.	Esep		
	Retain the property and [explain]:	the 6il1		
Creditor's Int LeiANT	☐ Surrender the property.	□ No		
name.	Retain the property and redeem it.	II yes		
property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	Exem. St		
SANVANO	(TRetain the property and [explain]:			
Creditor's	☐ Surrender the property.	□ No		
name:	Retain the property and redeem it.	☐ Yes		
Description of property securing debt;	Retain the property and enter into a Reaffirmation Agreement.			
	Retain the property and [explain]:			
		-		

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Debtor 1

Spanne At	Cloude Yours	<i>a</i>
50ne 1/1	Hanten /Ans	Case number (# known)
First Name Middle Name	Last Narite	

Describe your unexpired personal property leases	Will the lease be assumed?
essor's name:	□ No
escription of leased operty:	☐ Yes
essor's name:	□ No
escription of leased roperty:	☐ Yes
essor's name:	□ No
escription of leased roperty:	Yes
essor's name:	□ No
escription of leased roperty:	☐ Yes
essor's name:	□ No
escription of leased roperty:	☐ Yes
essor's name:	□ No
escription of leased operty:	☐ Yes
essor's name:	□ No
Description of leased property:	Yes

Debtor 1	seorge	Aberganden	ARTO
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Ba	ankruptcy Court for the:	District of	
Case number (if known)		******	

Check one box only as directed in this form and in Form 122A-1Supp:
1. There is no presumption of abuse.
 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A–2).
3. The Means Test does not apply now because of qualified military service but it could apply later.

☐ Check if this is an amended filing

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

Calculate Your Current Monthly Income Part 1: 1. What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11. Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11. ☐ Married and your spouse is NOT filling with you. You and your spouse are: Living In the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B). Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case, 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, but the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 2 or Debtor 1 non-filing spous 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). 3. Allmony and maintenance payments. Do not include payments from a spouse if Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, profession, Debtor 1 Debtor 2 or farm Gross receipts (before all deductions) Ordinary and necessary operating expenses Copy Net monthly income from a business, profession, or farm 6. Net income from rental and other real property Debtor 1 Debtor 2 \$ Gross receipts (before all deductions) Ordinary and necessary operating expenses Copy Net monthly income from rental or other real property 7. Interest, dividends, and royalties

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Debte	tor 1 Ceans Alex Ander List Name Middle Name List Name	Anop	Case number (# known)
			Column A Column B Debtor 1 Debtor 2 or
^	Harris de la companya del companya de la companya del companya de la companya de		non-filling spouse
8.	Unemployment compensation Do not enter the amount if you contend that the amount	t received was a honefit	\$
	under the Social Security Act. Instead, list it here:	-	
	For you		
	For your spouse	··· \$	
9.	Pension or retirement income. Do not include any ambenefit under the Social Security Act.	nount received that was a	\$
10.	Income from all other sources not listed above. Spe Do not include any benefits received under the Social S as a victim of a war crime, a crime against humanity, or terrorism. If necessary, list other sources on a separate	Security Act or payments receing international or domestic	
			\$
			\$
	Total amounts from separate pages, if any.		+\$
11.	Calculate your total current monthly income. Add lin column. Then add the total for Column A to the total for		2400 + s = s
Da	art 2: Determine Whether the Means Test Ap	miles to You	monthly income
		· · · · · · · · · · · · · · · · · · ·	
12.	Calculate your current monthly income for the year.	· · · · · · · · · · · · · · · · · · ·	20648
	12a. Copy your total current monthly income from line	11	
	Multiply by 12 (the number of months in a year).		x 12
	12b. The result is your annual income for this part of the	ne form.	12b.
4-			
13.	. Calculate the median family income that applies to y	you. Follow these steps:	
13.	Calculate the median family income that applies to y Fill in the state in which you live.	you. Follow these steps:	
13.		you. Follow these steps:	
13.	Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of	of household.	
13.	Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of 5 find a list of applicable median income amounts, go	of householdonline using the link specified	in the separate
	Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of	of householdonline using the link specified	in the separate
	Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of the find a list of applicable median income amounts, go instructions for this form. This list may also be available. How do the lines compare? 14a. Line 12b is less than or equal to line 13. On the	of householdonline using the link specified at the bankruptcy clerk's office	in the separate ce.
	Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of the find a list of applicable median income amounts, go instructions for this form. This list may also be available. How do the lines compare?	of householdonline using the link specified at the bankruptcy clerk's office top of page 1, check box 1,	in the separate te. There is no presumption of abuse.
14.	Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of the first of applicable median income amounts, go instructions for this form. This list may also be available. How do the lines compare? 14a. Line 12b is less than or equal to line 13. On the Go to Part 3. 14b. Line 12b is more than line 13. On the top of part Go to Part 3 and fill out Form 122A-2.	of householdonline using the link specified at the bankruptcy clerk's office top of page 1, check box 1,	in the separate te. There is no presumption of abuse.
14.	Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of the find a list of applicable median income amounts, go instructions for this form. This list may also be available. How do the lines compare? 14a. Line 12b is less than or equal to line 13. On the Go to Part 3. 14b. Line 12b is more than line 13. On the top of part 3 and fill out Form 122A-2. Sign Below	of householdonline using the link specified at the bankruptcy clerk's office top of page 1, check box 1, age 1, check box 2, The presure	in the separate see. There is no presumption of abuse. mption of abuse is determined by Form 122A-2.
14.	Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of the find a list of applicable median income amounts, go instructions for this form. This list may also be available. How do the lines compare? 14a. Line 12b is less than or equal to line 13. On the Go to Part 3. 14b. Line 12b is more than line 13. On the top of part 3 and fill out Form 122A-2. Sign Below	of householdonline using the link specified at the bankruptcy clerk's office top of page 1, check box 1, age 1, check box 2, The presure	in the separate te. There is no presumption of abuse.
14.	Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of the find a list of applicable median income amounts, go instructions for this form. This list may also be available. How do the lines compare? 14a. Line 12b is less than or equal to line 13. On the Go to Part 3. 14b. Line 12b is more than line 13. On the top of part 3 and fill out Form 122A-2. Sign Below	of householdonline using the link specified at the bankruptcy clerk's office top of page 1, check box 1, age 1, check box 2, The presure	in the separate see. There is no presumption of abuse. mption of abuse is determined by Form 122A-2.
14.	Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of the find a list of applicable median income amounts, go instructions for this form. This list may also be available. How do the lines compare? 14a. Line 12b is less than or equal to line 13. On the Go to Part 3. 14b. Line 12b is more than line 13. On the top of part 3 and fill out Form 122A-2. Sign Below By signing here declare under penalty of part.	of householdonline using the link specified at the bankruptcy clerk's office top of page 1, check box 1, age 1, check box 2, The presur	in the separate see. There is no presumption of abuse. mption of abuse is determined by Form 122A-2.
14.	Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of the first of applicable median income amounts, go instructions for this form. This list may also be available. How do the lines compare? 14a. Line 12b is less than or equal to line 13. On the Go to Part 3. 14b. Line 12b is more than line 13. On the top of part 3 and fill out Form 122A-2. Sign Below By signing here declare under penalty of part.	of householdonline using the link specified at the bankruptcy clerk's office top of page 1, check box 1, age 1, check box 2, The presultry that the information on this	in the separate ce. There is no presumption of abuse. mption of abuse is determined by Form 122A-2. statement and in any attachments is true and correct.
14.	Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of the fine and size of applicable median income amounts, go instructions for this form. This list may also be available. How do the lines compare? 14a. Line 12b is less than or equal to line 13. On the Go to Part 3. 14b. Line 12b is more than line 13. On the top of part Go to Part 3 and fill out Form 122A-2. Sign Below By signing here declare under penalty of part Go to Part 3.	of householdonline using the link specified at the bankruptcy clerk's office top of page 1, check box 1, age 1, check box 2, The presultry that the information on this	in the separate see. There is no presumption of abuse. Imption of abuse is determined by Form 122A-2. It is statement and in any attachments is true and correct. Signature of Debtor 2
14.	Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of the fine and size of applicable median income amounts, go instructions for this form. This list may also be available. How do the lines compare? 14a. Line 12b is less than or equal to line 13. On the Go to Part 3. 14b. Line 12b is more than line 13. On the top of part Go to Part 3 and fill out Form 122A-2. Sign Below By signing here declare under penalty of part Go to Part 3.	of household	in the separate te. There is no presumption of abuse. Imption of abuse is determined by Form 122A-2. It is statement and in any attachments is true and correct. Signature of Debtor 2 Date

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Fill in t	his information to ider	ntify your case:		1
	(Fig. #95)	Arman	Charten	
Debtor 1	First Name	Middle Name	Last Name	
Debtor 2	f filing) First Name	Middle Name	Last Name	
	-			
	tates Bankruptcy Court for t	the: District of		
(If known)				
				Check if this is an amended filing
Officia	al Form 122A	-1Supp		
			n Presumption	n of Abuse Under § 707(b)(2) 12/1
exempted exclusion required	d from a presumption on in this statement ap by 11 U.S.C. § 707(b)(2	of abuse. Be as complete plies to only one of you, 2)(C).	and accurate as possible	ncome (Official Form 122A-1), if you believe that you are If two married people are filing together, and any of the complete a separate Form 122A-1 if you believe that this is
Part 1:	Identify the Kind o	f Debts You Have		
person		purpose." Make sure that y		C. § 101(8) as "incurred by an individual primarily for a the the answer you gave at line 16 of the Voluntary Petition for
D No.		n the top of page 1 of that the think the signed Form 122		no presumption of abuse, and sign Part 3. Then
☐ Yes	s. Go to Part 2.	it mat the eighter 1 cm.		
Part 2:	Determine Whethe	r Military Service Prov	visions Apply to You	
0 4			7.44/4\\9	
2. Are you	u a disabled veteran (a	is defined in 38 U.S.C. § 37	'41(1))r	
~	. Go to line 3.			
☐ Yes	s. Did you incur debts m 10 U.S.C. § 101(d)(1)		live duty or while you were (performing a homeland defense activity?
	No. Go to line 3.			
		22A-1; on the top of page 'this supplement with the si		There is no presumption of abuse, and sign Part 3.
3. Are yo	u or have you been a f	Reservist or member of th	e National Guard?	
		-1. Do not submit this supp		
Ŭ Ye	s. Were you called to ac	tive duty or did you perforn	n a homeland defense a c tivi	ty? / 6 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).
	No. Complete Form 12	2A-1. Do not submit this su	ipplement.	144
D	Yes. Check any one of	the following categories th	at applies: // \	/ 1/
	l was called to act	ive duty after September	11, 2001, for at least	you checked one of the categories to the left, go to
	90 days and remain		V	Form 122A-1. On the top of page 1 of Form 122A-1,
	l was called to act	ive duty after September	11, 2001, for at least	check box 3, The Means Test does not apply now, and sign Part 3. Then submit this supplement with the signed
	90 days and was re	eleased from active duty on	l	Form 122A-1. You are not required to fill out the rest of
	which is fewer than	540 days before I file this	bankruptcy case.	Official Form 122A-1 during the exclusion period. The
	I am performing a	homeland defense activi	ty for at least 90 days.	exclusion period means the time you are on active duty
	☐ I performed a hon	neland defense activity fo	r at least 90 days	or are performing a homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).
	•	, which is fewer	•	
	before I file this bar		-	If your exclusion period ends before your case is closed, you may have to file an amended form later.

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Debtor 1 College	Check the appropriate back at dieselected lines 40 or 42: According to the calculations required by this Statement: 1. There is no presumption of abuse. 2. There is a presumption of abuse.
Official Form 122A-2 Chapter 7 Means Test Calculation	04/16
To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current	
is needed, attach a separate sheet to this form. Include the line number to which the additional pages, write your name and case number (if known). Part 1: Determine Your Adjusted Income	
	icial Form 122A-1 here
2. Did you fill out Column B in Part 1 of Form 122A-1? 4 No. Fill in \$0 for the tetal on line 3.	10,000/10
Yes. Is your spouse filing with you?	
No. Go to line 3.	
Yes. Fill in \$0 for the total on line 3.	
Adjust your current monthly income by subtracting any part of your spouse's income not us household expenses of you or your dependents. Follow these steps:	ed to pay for the
On line 11, Column B of Form 122A-1, was any amount of the income you reported for your spousoregularly used for the household expenses of you or your dependents?	∍ NOT
Mo. Fill in 0 for the total on line 3.	,
☐ Yes. Fill in the information below:	
State each purpose for which the income was used For example, the income is used to pay your spouse's tax debt or to support people other than you or your dependents Fill in the amount you are subtracting from your spouse's income	
\$	
<u> </u>	
+ <u>\$</u>	
Total\$	Copy total here → -\$
Adjust your current monthly Income. Subtract the total on line 3 from line 1.	2400.00

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Part 2:

Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted from your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from income in lines 5 and 6 of Form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the form refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.



National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.



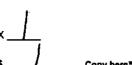
7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

7a. Out-of-pocket health care allowance per person



Number of people who are under 65





7c. Subtotal. Multiply line 7a by line 7b.

People who are 65 years of age or older

7d. Out-of-pocket health care allowance per person



7e. Number of people who are 65 or older



Subtotal. Multiply line 7d by line 7e.



7g. Total. Add lines 7c and 7f.....



Case number (if known) Debtor 1 **Local Standards** You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: ■ Housing and utilities - Insurance and operating expenses ■ Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. 8. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. 9. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses...... 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of the credito amount on Total average monthly payment line 33a. 9c. Net mortgage or rent expense. Copy Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this amount is less than \$0, enter \$0. 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why: 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. 0. Go to line 14. 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area.

Doc 1

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Doc 1 Page 66 of 75 Debtor 1 Case number at to 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. Vehicle 1 Describe Vehicle 1: 13a. Ownership or leasing costs using IRS Local Standard. 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you filed for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly Repeat this Total average monthly payment amount on line 33b. Copy net 13c. Net Vehicle 1 ownership or lease expense Vehicle 1 expense Subtract line 13b from line 13a. If this amount is less than \$0, enter \$0. Vehicle 2 13d. Ownership or leasing costs using IRS Local Standard. 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. of each creditor for Vehicle 2 Average monthly Repeat this Сору amount on here 🗲 line 33c. Copy net 13f. Net Vehicle 2 ownership or lease expense Vehicle 2 expense Subtract line 13e from 13d. If this amount is less than \$0, enter \$0... here ... 👈 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the Public Transportation expense allowance regardless of whether you use public transportation. 15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim

more than the IRS Local Standard for Public Transportation.

Case 16-35047-KRH Doc 1 Filed 10/13/16 Entered 10/13/16 11:11:10 Desc Main Page 67 of 75 Debtor 1 Case number (# known) Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories. 16. Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, selfemployment taxes, Social Security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes. 17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. 18. Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term. 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or for your physically or mentally challenged dependent child if no public education is available for similar services. 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education. 22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25. 23. Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted. 24. Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23.

Case 16-35047-KRH Doc 1 Filed 10/13/16 Entered 10/13/16 11:11:10 Document Page 68 of 75 Debtor 1 First Name Middle Name Last Name Last Name Case number (ir known)	Desc Main
Additional Expense Deductions These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24.	
25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.	r
Health insurance \$	
Disability insurance \$	
Health savings account + \$	
Total Copy total here→	\$
Do you actually spend this total amount?	
No. How much do you actually spend?	
26. Continuing contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b).	\$ <u></u>
27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. By law, the court must keep the nature of these expenses confidential.	\$
28. Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on line 8.	
If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs.	, (*)
You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary.	·
29. Education expenses for dependent children who are younger than 18. The monthly expenses (not more than \$160.42° per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school.	30
You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23.	
* Subject to adjustment on 4/01/19, and every 3 years after that for cases begun on or after the date of adjustment.	0
30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.	3
To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.	
You must show that the additional amount claimed is reasonable and necessary.	<i>~</i>
31. Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization, 26 U.S.C. § 170(c)(1)-(2).	+ \$
32. Add all of the additional expense deductions. Add lines 25 through 31.	\$
Official Form 122A-2 Chapter 7 Means Test Calculation	page 6

Case 16-35047-KRH	Doc 1 Filed 10 Documer		0/13/16 11:11:	:10 Desc	c Main
ebtor 1 Frat Name Middle Name	Last Name	Case n	iumber (#known)		
Deductions for Debt Payment 33. For debts that are secured by ar loans, and other secured debt, for the calculate the total average mon creditor in the 60 months after you	ill in lines 33a through 33a othly payment, add all amou	e. Ints that are contractually due t			
			Average monthly		
Mortgages on your home:	•		payment 78 C	10	
33a. Copy line 9b here		·····	\$ 700.0		
Loans on your first two ve	ehicles:		150,0	6	
33b. Copy line 13b here	•••••••••••••••••••••••••••••••••••••••		\$	- 	
33c. Copy line 13e here	************************************		s 400,0	90	w. X
33d. List other secured debts:			·	47	in the same
Next, divide by 60 and fill	ine 33 secured by your pr your support or the support u must pay to a creditor, in a ossession of your property in the information below.	imary residence, a vehicle, ort of your dependents? addition to the payments (called the cure amount).	\$ 786,0 150,00 \$ 400,0 \$ \$ 1336.0	Copy total here	· \$
Name of the creditor	Identify property that secures the debt	Total cure amount	Monthly cure amount		
		\$ ÷ 60 =	\$		
		\$ + 60 =	\$		
		\$ +60 =	+ \$		
		Total	\$	Copy total	\$
35. Do you owe any priority claims a that are past due as of the filing No. Go to line 36. Yes. Fill in the total amount of a ongoing priority claims, su	date of your bankruptcy o	case? 11 U.S.C. § 507.	I	<u>ن</u>	
Total amount of all past-d	due priority claims		·· \$	÷ 60 =	\$

Case 1	16-35047-K	RH Doc 1	Filed 1 Docume	0/13/16 E nt Page	ntered 10 70 of 75)/13/16	11:11:1	.0 Desc l	Main
Debtor 1	DECUBE St Name Middle P	HALL Last N	2 ame		Case	number (# kn	own)		
For mo instruct	ge information, go	Bankruptcy Basic	ink for <i>Bankrup</i>	.S.C. § 109(e). htcy Basics specific available at the ba					
	Projected month	ly plan payment if	you were filing	under Chapter 13		\$		_	
	Administrative O	r for your district a ffice of the United or by the Executive	States Courts	list issued by the (for districts in Alal ted States Trustee	bama and s (for all	×			
	link specified in t		ictions for this t	ur district, go onlin form. This list may				~	
	Average monthly	/ administrative ex	pense if you w	ere filing under Ch	apter 13	\$		Copy total	\$
37. Add all c Add lines	of the deductions s 33e through 36.	s for debt payme	nt.			•••••			\$ /2356.0
Total Deduc	ctions from Inco	me							
Copy line		ductions. enses allowed und		, 0	_				
		itional expense de uctions for debt pa		\$ +\$	600				
Part 3:	Determine Wh	Tota ether There Is	al deductions a Presumpti	s 1/22 on of Abuse	6 W C	opy total he	or e	→	\$
39a. Co 39b. Co 39c. Mo Su	opy line 4, adjuste opy line 38, Total of onthly disposable obtract line 39b fro or the next 60 mon	income. 11 U.S.C. m line 39a. nths (5 years)	income § 707(b)(2).	; 240 - ; 133 - ; 164	. he		\$ / / / × 60 \$ 60 / /	64,00 34 Copy	6,989
The I to Pa	line 39d is less that 5. line 39d is more thill out Part 4 if you	nan \$7,700*. On the than \$12,850*. Or u claim special circ	ne top of page the top of pag cumstances. Th		ck box 1, <i>There</i> neck box 2, <i>The</i>			abuse. Go	<u> </u>
		•		12,850*. Go to line after that for cases		er the date	of adjustme	nt.	

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Debtor 1 Case no	umber (# клоwп)
41. 41a. Fill in the amount of your total nonpriority unsecured debt. If you filled out A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form	3
41b. 25% of your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i)(l). Multiply line 41a by 0.25.	x .25 \$ Copy \$
42. Determine whether the income you have left over after subtracting all allowed deduction is enough to pay 25% of your unsecured, nonpriority debt. Check the box that applies:	ons A
Line 39d is less than line 41b. On the top of page 1 of this form, check box 1, There is a Go to Part 5.	no presumption of abulse. 🗸
Line 39d is equal to or more than line 41b. On the top of page 1 of this form, check bot of abuse. You may fill out Part 4 if you claim special circumstances. Then go to Part 5.	x 2, There is a presumption
Part 4: Give Details About Special Circumstances	
43. Do you have any special circumstances that justify additional expenses or adjustments of reasonable alternative? 11 U.S.C. § 707(b)(2)(B).	f current monthly income for which there is no
☐ Yes. Fill in the following information. All figures should reflect your average monthly expense	or income adjustment
for each item. You may include expenses you listed in line 25.	or moone adjustment
You must give a detailed explanation of the special circumstances that make the expensadjustments necessary and reasonable. You must also give your case trustee documen expenses or income adjustments.	ses or income ntation of your actual
Give a detailed explanation of the special circumstances	Average monthly expense or income adjustment
	\$
	- \$
	\$
	- \$
Part 5: Sign Below	
By signing here, declare under penalty of perjury that the information on this statement	and in any attachments is true and correct.
Signature of Debtor 1	btor 2
Date MM / DD / YYYY	

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF VIRGINIA

Richmeno

Division

In re

Case No.

Debtor(s)

Chapter

REQUEST FOR WAIVER

The debtor(s) hereby request(s) that the Court waive the requirement of the mailing matrix submission on a computer diskette as required by LBR 1007-1. Due to financial constraints and the inability to access the equipment necessary to comply with this requirement, the petitioner requests acceptance of the matrix submitted in the hard-copy scannable format.

The debtor understands that if the court denies the request, the debtor or the attorney for the debtor shall submit the list of creditors on computer diskette no later than three (3) business days after the clerk's notification that the request has been denied.

Joint Debtor

Date

(ver. 4/1/2003)

EASTERN DISTRICT OF VIRGINIA

In re George MARID

[diskcs ver. R-1/2003]

Case No.

Chapter 7

Debtor(s)

COVER SHEET FOR LIST OF CREDITORS

I hereby certify under penalty of perjury that the master mailing list of creditors submitted either on computer diskette or by a typed hard copy in scannable format, with Request for Waiver attached, is a true, correct and complete listing to the best of my knowledge.

I further acknowledge that (1) the accuracy and completeness in preparing the creditor listing are the shared responsibility of the debtor and the debtor's attorney, (2) the court will rely on the creditor listing for all mailings, and (3) that the various schedules and statements required by the Bankruptcy Rules are not used for mailing purposes.

Master mailing list of creditors submitted via:

	(a)	computer diskette listing a total of	creditors; or
	(b)	scannable hard copy, with Request for consisting of pages, listing a total	Waiver attached, al of creditors C
			Joint Debtor
Date:		[Check if applicable]foreign addresses included	

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REDITOR Document Page 74 of 75

Comen Moretage Bank of Ny. Mellow 171,295 P.O.BX 24738 West Polm Beach Floration 334/6-2) Springlest Fanoncial Exempt 4,900.00
601 NW 200 Street Evansville, Indiana 47708 Exempt 400.00 3.) FAST logNS TAPK phone (804) 230-011) 4.) Vertzon/F=tos 1/380 P.O. BOX 15/24 ALBANY New York 12212-5/24 811.00 5-) Revenue Group 47-80 Hint/ey Industrial Phry Cleveland OHID 44/09 611.00 6) Comcast CABLE 5401 Stoples Mills 77.00 Henrico VA 23228 Department of Publiches 430/ EAST Panham Henrico VA 23228

Doc 1 Entered 10/13/16 11:11:10 Amount Oven Document Page 75 of 75 8.) IRS 1,077 Disparte 496.00 Louisville Kenthoty 40293-1,000 9-1 Asset Recovery Wells Frange 1910 16th Street Suite 610 6,053 Derver, Colorsoo 80202 10-) BANK OF AMERICA 2,200 P.O. Box 98223 EL PASO, Texas 79998-2238 Second 39,000 montgese. 11-1 Syntryst BANK 11013 West Broad Subordinate RICHMOND, VIRGINIA GLEN Allen 23060 ocwen Unsecure 12) AMCA 2269 S. SAWMI// ROAD, 681,00 Elmsford, New York DOESN'T 13-) Debt Recovery Solutions
13-) Debt Recovery Solutions
13-) 900 Merchants Concourse
15-0
Westbury New York 11590
14.) Verizon Wincless
14.) Verizon Wincless
16.0. Box 4003
Acworth Georgia 30101 SHOWI 338.57